

FEC FORM 3L

SECRETARY OF THE SENATE

REPORT OF CONTRIBUTIONS BUNDLED BY LOBBYISTS/REGISTRANTS
AND LOBBYIST/REGISTRANT PACs

1. NAME OF COMMITTEE (in full) **Bob Casey for Senate Inc** USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines

ADDRESS (number and street) **607 14th Street, NW, Suite 800**

Check if different than previously reported. (ACC) **Washington** **DC** **20005**
CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER **C00431056**

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

4. STATE **PA** DISTRICT **00**

5. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)

☒ July 15 Quarterly Report (Q2) and/or Semi-annual Report

☐ October 15 Quarterly Report (Q3)

☐ January 31 Year-End Report (YE) and/or Semi-annual Report

☐ July 31 Mid-Year Report (Non-election Year - PAC/Party) (MY) and/or Semi-annual Report

(b) Monthly Report Due On: ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)

☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only)

☐ Apr 20 (M4) ☐ Jul 20 (M7) and/or Semi-annual R report ☐ Oct 20 (M10) ☐ Jan 31 (YE) and/or Semi-annual Report

(c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Run off (12R)

☐ Special (12S) ☐ Convention (12C)

Election on ☐ in the State of ☐ This report also covers the semi-annual period See Line 6(b)

(c) 30-Day POST-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on ☐ in the State of ☐ This report also covers the semi-annual period See Line 6(b)

6. Covering Period(s) (a) Quarterly/Monthly/Pre-/Post-Election Covered Period (b) Semi-annual Covered Period

04 **01** **2010** through **06** **30** **2010** and/or ☒ January 1 - June 30

☐ July 1 - December 31

7. Total Reportable Bundled Contributions by Lobbyists/Registrants or Lobbyist/Registrant PACs (a) Quarterly/Monthly/Pre-/Post-Election Covered Period (b) Semi-annual Covered Period

20350.00 **20350.00**

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer **Thomas Leonard**

Signature of Treasurer

Electronically Filed by Thomas Leonard

Date

07 **15** **2010**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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